| TPEN.  |   | PART B - FEE(S   | ) TRANSMITTAL  | ·<br>·  | <i>,</i>  |
|--|---|--|--|---|---|
|  | this form, together wi  | th applicable fee(s), to: <u>I</u><br>or   | P.O. Box 1450  |   |   |
| INSTRUCTIONS This appropriate the contract of  | form should be used for transcriptions or transcription or transcription for the company of the | nsmitting the ISSUE FEB and<br>Patent, advance orders and note in Block 1, by (a) specifying   |  | uired). Blocks 1 through 5 s<br>will be mailed to the current   | hould be completed where  |
| maintenance fee notificati   | ons.  | e in Block 1, by (a) specifying  | a new correspondence addres  | s; and/or (b) indicating a sepa   | TRIE TEE ADDRESS 10   |
|  | NCE ADDRESS (Note: Use Block 1 for 7590 07/06/2005  | r any change of address)   | Note: A certificate of Fee(s) Transmittal. To papers. Each addition have its own certification.  | of mailing can only be used for<br>his certificate cannot be used<br>and paper, such as an assignment<br>to of mailing or transmission.   | or domestic mailings of the<br>for any other accompanying<br>ent or formal drawing, mu-                           |
| QUARLES & F<br>FIRSTAR PLAZ<br>P.O. BOX 2113 S<br>MADISON, WI  | A, ONE SOUTH PINCE<br>SUITE 600   | KNEY STREET  | I hereby certify that<br>States Postal Service<br>addressed to the Me<br>transmitted to the US   | ertificate of Mailing or Trans<br>this Fee(s) Transmittal is bein<br>with sufficient postage for fir<br>ail Stop ISSUP FEB address<br>PTO (571) 222885, on the o  | smission g deposited with the Unite st class mail in an envelop above, or being facsimil date indicated below.    |
| 6/2005 HDESTA2 000   | 00081 170055 0952203  | 30 ·   | Nicholas   |   | (Depositor's name   |
| C:1501 1400.00   |   | ·•   | Mu   | 1/2/  | (Signature  |
| C:8001 30.00   |   |  | August   | 12, 2005  | (Date   |
| APPLICATION NO.  | FILING DATE   | FIRST NAME   | ED INVENTOR  | ATTORNEY DOCKET NO.   | CONFIRMATION NO.  |
| 09/522,030   | 03/09/2000  | Tames A  | Thomson  | 96-0296-96544   | 4331  |
| · .  |   | ON OF PRIMATE EMBRYON  |  | 7   |   |
| TITED OF HAVELANDA   |   |  |  |   |   |
| APPLN. TYPE  | SMALL ENTITY  | ISSUE FEE  | PUBLICATION FEE  | TOTAL FEE(S) DUE  | DATE DUE  |
|  |   |  |  |   |   |
| nonprovisional   | -YES NO   | <del>-\$700</del> \$1400   | \$0  | <del>-\$790</del> -\$1400   | 10/06/2005  |
|  | -YES NO   | <del>-\$700</del> \$1400<br>ART UNIT   | \$0<br>CLASS-SUBCLASS  | <del>-\$700</del> -\$1400   | 10/06/2005  |
| WOITAC   | AMINER<br>EH, JOSEPH T  | ART UNIT<br>1632   | CLASS-SUBCLASS<br>435-325000   |   |   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder Address form PTO/SB  | AMINER CH, JOSEPH T  nce address or indication of "F  ondence address (or Change of   | Fee Address" (37  f Correspondence cation form se of a Customer  ART UNIT  2. For pri (1) the n or agents (2) the na registerec 2 registerec 2 registerec  | CLASS-SUBCLASS   | list Quarent attorneys 1 Quarent attorneys 2  |   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder Address form PTO/SB  "Fee Address" indi PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unle  | AMINER  H, JOSEPH T  nce address or indication of "F  ondence address (or Change of /122) attached. cation (or "Fee Address" Indic or more recent) attached. Us  ND RESIDENCE DATA TO F  cases an assignee is identified b  | Fee Address" (37  f Correspondence cation form se of a Customer  ART UNIT  2. For pri (1) the n or agents (2) the na registerec 2 registerec 2 registerec  | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as d attorney or agent) and the nared patent attorneys or agents. It name will be printed.  IT (print or type)  The patent of the patent of the patent of the patent of the patent. If an assignment of the patent of the patent.   | list Quarent attorneys 1 Quarent attorneys 2 mes of up to ff no name is 3   | rles & Brady,   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  Change of corresponder PTO/SB "Fee Address" indir PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIGNES Wisconsin Alm Wisconsin Alm  | AMINER  2H, JOSEPH T  Ince address or indication of "F  Indence address (or Change of /122) attached.  Cation (or "Fee Address" Indic 2 or more recent) attached. Us  ND RESIDENCE DATA TO F  case an assignee is identified be in 37 CFR 3.11. Completion  GNEE  Cammi Research Fo   | ART UNIT  1632  Fee Address" (37  f Correspondence  cation form see of a Customer  BE PRINTED ON THE PATEN below, no assignee data will ap of this form is NOT a substitute  (B) RESIDEN  Dundation  Madi  | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as d attorney or agent) and the nared patent attorneys or agents. It name will be printed.  IT (print or type)  In the patent. If an assign for filing an assignment.  IT (CE: (CITY and STATE OR COLLISON, WI US   | list ent attorneys  a member a mes of up to If no name is  gnee is identified below, the of   | rles & Brady,   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  "Fee Address" indi PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIG Wisconsin Alm  | AMINER  2H, JOSEPH T  Ince address or indication of "F  Indence address (or Change of /122) attached.  Cation (or "Fee Address" Indic 2 or more recent) attached. Us  ND RESIDENCE DATA TO F  case an assignee is identified b  in 37 CFR 3.11. Completion  iNEB  camni Research Fo  ate assignee category or catego  | ART UNIT  1632  Fee Address" (37  f Correspondence  cation form se of a Customer  BE PRINTED ON THE PATEN below, no assignee data will ap tof this form is NOT a substitute  (B) RESIDEN   | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pater of the control of | list ent attorneys  a member a mes of up to ff no name is  gnee is identified below, the of   | rles & Brady,   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  "Fee Address" indip PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIG Wisconsin Alax  Please check the appropring   | AMINER  2H, JOSEPH T  Ince address or indication of "F  Indence address (or Change of /122) attached.  Cation (or "Fee Address" Indic 2 or more recent) attached. Us  ND RESIDENCE DATA TO F  case an assignee is identified b  in 37 CFR 3.11. Completion  iNEB  camni Research Fo  ate assignee category or catego  | ART UNIT  1632  Fee Address" (37  1 (1) the n or agents (2) the n registere 2 registere 1 sited, no  BE PRINTED ON THE PATEN below, no assignee data will ap to of this form is NOT a substitute  (B) RESIDEN Madionics (will not be printed on the 4b. Payment of   | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pater of the control of | list ent attorneys  1 Quar ent attorneys  2 mes of up to If no name is  3 ence is identified below, the of DUNTRY)  Corporation or other private gr   | rles & Brady,   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  "Fee Address" indip PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLBASE NOTE: Unle recordation as set forth (A) NAME OF ASSIGNED AND AND Please check the approprious And Andrease Check the approprious Interpretation of the properties of the control of | AMINER  H, JOSEPH T  Ince address or indication of "F  Indence address (or Change of  //122) attached.  cation (or "Fee Address" Indice 2 or more recent) attached. Us  ND RESIDENCE DATA TO H  cass an assignee is identified be in 37 CFR 3.11. Completion  in EB  Inmni Research Fo  ate assignee category or categore enclosed:  o small entity discount permitt  | ART UNIT  1632  Fee Address" (37  f Correspondence  cation form se of a Customer  BE PRINTED ON THE PATEN below, no assignee data will ap to of this form is NOT a substitute  (B) RESIDEN  Coundation  Mad:  (B) Residen  (B) Residen  (B) Residen  (B) Residen  (B) Residen  (C) the not registere  2 registere  3 registere  4 substitute  (B) Residen  Mad:  (C) the not registere  2 registere  2 registere  2 registere  3 registere  4 substitute  (B) Residen  Mad:  (B) Residen  Mad:  (B) Residen  Mad:  (B) Payment of  Payment of  Payment of  Payment of  Payment of   | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pater of the control of the patent front page, ame of a single firm (having as at attorney or agent) and the narred patent attorneys or agents. It is name will be printed.  IT (print or type)  IT (p | list ent attorneys  a member a mes of up to if no name is  genee is identified below, the of DUNTRY)  Curporation or other private grenclosed.  38 is attached.   | rles & Brady,   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  "Fee Address" indip PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLBASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG Wisconsin Alta  Please check the appropri  4a. The following fee(s) a  | AMINER  H, JOSEPH T  Ince address or indication of "F  Indence address (or Change of  //122) attached.  cation (or "Fee Address" Indice 2 or more recent) attached. Us  ND RESIDENCE DATA TO H  cass an assignee is identified be in 37 CFR 3.11. Completion  in EB  Inmni Research Fo  ate assignee category or categore enclosed:  o small entity discount permitt  | ART UNIT  1632  Fee Address" (37  f Correspondence  cation form se of a Customer  BE PRINTED ON THE PATEN below, no assignee data will ap to of this form is NOT a substitute  (B) RESIDEN  Coundation  Mad:  (B) Residen  (B) Residen  (B) Residen  (B) Residen  (B) Residen  (C) the not registere  2 registere  3 registere  4 substitute  (B) Residen  Mad:  (C) the not registere  2 registere  2 registere  2 registere  3 registere  4 substitute  (B) Residen  Mad:  (B) Residen  Mad:  (B) Residen  Mad:  (B) Payment of  Payment of  Payment of  Payment of  Payment of   | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pater of the control of the patent front page, ame of a single firm (having as at attorney or agent) and the narred patent attorneys or agents. It is name will be printed.  IT (print or type)  IT (p | list ent attorneys  a member a mes of up to if no name is  genee is identified below, the of DUNTRY)  Curporation or other private grenclosed.  38 is attached.   | rles & Brady,   |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  "Fee Address" indip PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLBASE NOTE: Underecordation as set forth (A) NAME OF ASSIGNED NAME OF ASSIGNED Address Wisconsin Address Please check the appropriate The following fee(s) and Single State Stat | AMINER  H, JOSEPH T  Ince address or indication of "F  Indence address (or Change of  //122) attached.  cation (or "Fee Address" Indice 2 or more recent) attached. Us  ND RESIDENCE DATA TO H  cass an assignee is identified be in 37 CFR 3.11. Completion  in EB  Inmni Research Fo  ate assignee category or categore enclosed:  o small entity discount permitt  | ART UNIT  1632  Fee Address" (37  1 Correspondence  Cation form registered 2 registered 2 registered 1 registered 2 regist | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as d attorney or agent) and the na red patent attorneys or agents. It is name will be printed.  IT (print or type)  IT (print or type)  IT (print or type)  IT (PRINT OR THE OR COLLING OF THE OR C | list ent attorneys  1 Quar ent attorneys  2 mes of up to If no name is  3 mee is identified below, the of DUNTRY)  Corporation or other private greenclosed.  38 is attached. charge the required fee(s), or (enclose an extra of     | rles & Brady, locument has been filed for the coup entity Government credit any overpayment, sopy of this form).  |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  Change of corresponder Address' indi PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Underecordation as set forth (A) NAME OF ASSIGNED Wisconsin Adm  Please check the appropria  Lissue Fee Publication Fee (No. Advance Order - #  5. Change in Entity Stat  a. Applicant claims   | AMINER  TH, JOSEPH T  Ince address or indication of "F  Indence address (or Change of  //122) attached.  Cation (or "Fee Address" Indic  2 or more recent) attached. Us  ND RESIDENCE DATA TO F  cases an assignee is identified be  in 37 CFR 3.11. Completion  in EB  Inmni Research Fo  ate assignee category or categore enclosed:  o small entity discount permitt  of Copies 10  us (from status indicated above  SMALL ENTITY status. See  | ART UNIT  1632  Fee Address" (37  1 Correspondence  Cation form registered 2 registered 2 registered 1 registered 2 regist | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as d attorney or agent) and the nared patent attorneys or agents. It is name will be printed.  IT (print or type)  IT (Print  | list ent attorneys  1 Quant ent attorneys  1 quant ent attorneys  2 mes of up to ff no name is  3 ence is identified below, the of DUNTRY)  Corporation or other private greenclosed.  38 is attached. charge the required fee(s), or | rles & Brady,  locument has been filed for the coup entity Government credit any overpayment, copy of this form). |
| WOITAC  1. Change of corresponder CFR 1.363).  Change of corresponder CFR 1.363).  Change of corresponder Address form PTO/SB Address indi PTO/SB/47; Rev 03-07 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG Wisconsin Adm  Please check the appropri  4a. The following fee(s) a  Issue Fee Publication Fee (No Advance Order - #  5. Change in Entity Stat a. Applicant claims  | AMINER  TH, JOSEPH T  Ince address or indication of "F  Indence address (or Change of  //122) attached.  Cation (or "Fee Address" Indic  2 or more recent) attached. Us  ND RESIDENCE DATA TO F  cases an assignee is identified be  in 37 CFR 3.11. Completion  in EB  Inmni Research Fo  ate assignee category or categore enclosed:  o small entity discount permitt  of Copies 10  us (from status indicated above  SMALL ENTITY status. See  | ART UNIT  1632  Fee Address" (37  Correspondence  Cation form registered 2 registered 2 registered 2 registered 2 registered 3 registered 4 registered 4 registered 5 registered 6 registered 6 registered 6 registered 6 registered 7 registered 7 registered 8 registered 8 registered 9 registered 1 registered 9 registered 9 registered 1 registered 1 registered 1 registered 2 registered 2 registered 1 registered 2 registered 1 registered 2 registered 2 registered 1 registered 2 registered 1 registered 2 registered 2 registered 1 registered 2 registered 1 registered 2 registered 1 registered 2 register | CLASS-SUBCLASS  435-325000  Inting on the patent front page, ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as d attorney or agent) and the nared patent attorneys or agents. It name will be printed.  IT (print or type)  IT (print or  | list ent attorneys  1 Quant ent attorneys  1 quant ent attorneys  2 mes of up to ff no name is  3 ence is identified below, the of DUNTRY)  Corporation or other private greenclosed.  38 is attached. charge the required fee(s), or | rles & Brady,  locument has been filed for the coup entity Government credit any overpayment, sopy of this form). |

This collection of information is required by 37CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.